Page 1 of 2 Attorney Docket No. 8141

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name

, , , , , , , , , , , , , , , , , , ,	•	entor (if only one name is listed	below) or an original, first and join
inventor (if plural names are invention entitled	listed below) of the sub	pject matter which is claimed an	d for which a patent is sought on the
PROMOTING WHOLE BOI	OY HEALTH		
the specification of which			
. 🔀	is attached hereto.		
[]	was filed on	as United State	s
	Application No		or
	PCT International A	application Number	
	and was amended of	n (if ap	oplicable)
-			dentified specification, including the
claims, as amended by any an			
-	y to disclose informati	on which is material to patental	bility as defined in Title 37 Code o
Federal Regulations §1.56.	1. 1. 1. 6. 1	T'4 25 H '4 104 4 5 1 6	110()() () 62(5()) 6 6 :
			119(a)-(d) or §365(b) of any foreign
			onal application which designated a
F-7			e also identified below any foreign
- 7-7		any PCT international application	on having a filing date before that o
the application on which prior	•		
Prior Foreign Applicat	ion(s)		Priority Claimed
		.	[] []
[] (Number)	(Country)	(Day/Month/Year Filed)	Yes No
E		 	[] []
[] (Number)	(Country)	(Day/Month/Year Filed)	Yes No
I hereby claim the benefit un listed below.	nder Title 35, United S	States Code §119(e) of any Uni	ted States provisional application(s
Application Serial No.	Filing Date	Application Serial No.	Filing Date
I hereby claim the benefit un	ler Title 35 United Sta	tes Code \$120 of any United St.	ates application(s), or §365(c) of any
			ow and, insofar as the subject matter
			PCT International application in the
		-	acknowledge the duty to disclose
			ral Regulations §1.56 which became
			CT international filing date of this
application:	date of the prior app	meation and the national of T	of international fining date of this
аррисацоп.			
U.S. Parent Application	PCT Parent	Parent Filing Date	Parent Patent Number
Number	Number	(MM/DD/YYYY	
	11011001	(NINE DE, 1111	(ii applicable)
			ecute this application and to transac
all business in the Patent and	rademark Office conf		
Attr. Nome	A44. D N 1	Associate Power	
Atty Name Emelyn I. Hiland	Atty Reg Number.	of Attorney Attached	

		1 LOSO CIACO	1 Ibboolate 1 Offer	
Atty Name	Atty Reg Number.	of Attorney	Attached	
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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